## **Voluntary Form for Hearing Aid Compatibility Status Report**

Reporting Period (MM/DD/YY) 07 / 01 / 08 to (MM/DD/YY) 12 / 31 / 08

Section 1. Company Information	Service Provider X	Device Manufacturer	
Company Name: Vitelcom Cellular			
Company Address: PO Box 6100			
City: St Thomas	State: US Virgin Islands	<i>Zip Code</i> : 00801	
<i>Phone</i> : 340 – 715 - 9256	<i>Fax</i> : 340 – 774 - 2555	E-mail: phayden@iccvi.com	
Peter Hayden – Gen. Manager			
Filing Agent / Law Firm:			
Filing Agent Contact Name:			
Filing Agent Address:			
City:	State:	Zip Code:	
Phone:	Fax:	E-mail:	

Section	on 2. Aco	ustic and	Inducti	ve Coupling-Co	ompatible Hands	et Models (Rate	ed At Least M3 and	d T3)
Index	Handset Maker	Model Name(s)	FCC ID(s)	Starting Available Date (MM/YY)	Ending Available Date (MM/YY)	Air Interface Technology(ies) (GSM,CDMA,W CDMA, etc)	Operating Frequency Bands (800, 1900, 2100, etc)	ANSI Standard C63.19 version number (manufacture r only)
2-1								
2-2								
2-3								
2-4								
more								

Section	on 2 Co	ontinued							
Index	M-Rating (M3, M4)	M-Rating Certification Date (MM/DD/YY )(manufactur er only)	M-Rating Testing Lab (manufacturer only)	T-Rating (T3, T4)	T-Rating Certification Date (MM/DD/YY)( manufacturer only)	T-Rating Testing Lab (manufacturer only)	Wi-Fi Interfac e (Yes / No)	Functionality Level (service provider only)	Remark
2-1									
2-2									
2-3									
2-4			www.antanananananananananananananananananan						
more									

Section	on 3. Aco	ustic Cou	pling-Co	ompatible Ha	andset Models	(Rated At Least M	I3 But Not T3)	1
Index	Handset Maker	Model Name(s)	FCC ID(s)	Starting Available Date (MM/YY)	Ending Available Date (MM/YY)	Air Interface Technology (GSM,CDMA,WCD MA, etc)	Operating Frequency Bands (800, 1900, 2100, etc)	ANSI Standard C63.19 version number (manufacturer only)
3-1	NA							
3-2								
3-3								
3-4								
more								

Section	on 3 Contin	ued				
Index	M-Rating (M3, M4)	M-Rating Certification Date (MM/DD/YY)(manufacturer only)	M-Rating Testing Lab (manufacturer only)	Wi-Fi Interface (Yes / No)	Functionality Level (service provider only)	Remark
3-1						
3-2						
3-3						
3-4						
more						

Section	on 4. Non-	-Hearing	Aid-Com	patible Ha	andset Mod	lels (Rated N	leither M3 N	or T3)		
Index	Handset Maker	Model Name(s)	FCC ID(s)	Starting Available Date (MM/YY)	Ending Available Date (MM/YY)	Air Interface Technology (GSM,CDM A, WCDMA, etc)	Operating Frequency (700, 800, 1900, 2100, etc)	Wi-Fi Interface (Yes / No)	Functionali ty Level (service provider only)	Remark
4-1	Nokia	3560	GMLRH -14	07 / 08	12 / 08	TDMA	850, 1900	No	Low level	See Section 10
4-2	Motorola	V60	IHDT56 AS1	07 / 08	12 / 08	TDMA	850, 1900	No	Low level	See Section 10
4-3	***************************************									
4-4										
more										

Section 5. Total Acoustic and Inductive Cou	ipling-Compatible, Acc	oustic Coupling	-Compatible,	and Non-
Hearing Aid-Compatible Handset Models H	By Air Interface Techno	ology		
Air Interface Technology (GSM,CDMA,WCDMA, etc)	Number of Fully Hearing Aid-Compatible Handset Models	Number of Acoustic Coupling- Compatible Handset Models	Number of Non-Hearing Aid- Compatible Handset Models	Remark
TDMA	None	None	2	No marketing on current TDMA service; planning CDMA

	upgrade in 2009

Section	on 6. Handset M	Iodels Tested Si	nce Last Rep	ort (Manufacturer Only)	
Index	Handset Maker	Model Name(s)	FCC ID(s)	Air Interface Technology(ies) (GSM,CDMA, WCDMA, etc)	Operating Frequency Bands (800, 1900, 2100, etc)
6-1					
6-2					
6-3					
6-4					
more					

Section	on 6 Co	ntinued				Land through the first through	
Index	M-Rating (M1-M4.)	M-Rating Testing Date (MM/DD/YY)	M-Rating Testing Lab (manufacturer only)	T-Rating (T1-T4, N/A)	T-Rating Testing Date (MM/DD/YY)	T-rating Testing Lab (manufacturer only)	Remark
6-1							
6-2			2,000				
6-3							
6-4							
more							

Section 7. Product Labeling Information:									
Do all hearing aid-compatible handsets include labeling?									
Yes No X									
<b>If no, please explain.</b> No hearing aid compatible handsets currently offered on legacy TDMA network; minimal remaining customer base; planning CDMA network upgrade in 2009									
Do all hearing aid-compatible handsets with the Wi-Fi air interface have clear and effective disclosure that the handset has not been tested for hearing aid compatibility with respect to its Wi-Fi voice operation?									
Yes No X									
If no, please explain. Not offered									

## Section 8. Public Website:

Does your company maintain a public website describing all hearing aid-compatible models, the ratings of those

models, and an explanation of the rating system?
Yes No X
If yes, please provide the address for the public website.
If no, please explain. Wireless website will be introduced with new CDMA service launch in 2009

## Section 9. Describe Consumer Outreach Efforts in the Past 12 Months:

None; no pro-active marketing has taken place in the past 12 months; currently just maintaining small existing customer base (less than 2000 subscribers) on old TDMA network; plan is to upgrade to CDMA – EVDO in 3Q 2009 with hearing aid compatible handsets

Section 10. (Service Providers Only) Describe the Levels of Functionality into Which the Compliant Handsets Fall and Provide An Explanation of the Service Provider's Methodology for Determining Levels of Functionality: Currently, we offer only two models. As such, this offering is within the de minimis exception set forth in Section 20.19(e). The functionality of these two handsets would be considered low in terms of features.